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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/480,826 | |
| | Filing Date | 01/10/2000 | |
| | First Named Inventor | Charles S. Taylor | |
| | Art Unit | 3773 | |
| | Examiner Name | Bui, Vy Q. | |
| Total Number of Pages in This Submission | 3 | Attorney Docket Number | GUID-006CON5 |

| ENCLOSURES (Check all that apply) | | |
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| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | - Resp. to Restriction Requirement (2 pgs.) |
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| <input type="checkbox"/> Reply to Missing Parts/Incomplete Application | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | Remarks | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|------------------------------|----------|--------|
| Firm Name | Law Office of Alan W. Cannon | | |
| Signature | | | |
| Printed name | Alan W. Cannon | | |
| Date | 7/1/08 | Reg. No. | 34,977 |


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| Signature | | | |
| Typed or printed name | Maria J. Sousa | Date | 7/1/2008 |

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| Signature |  | Date | 7/1/2008 |

| | | |
|---|----------------------------------|---|
| RESPONSE TO RESTRICTION REQUIREMENT Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | Attorney Docket Confirmation No. | GUID-006CON5 4782 |
| | First Named Inventor | Taylor |
| | Application Number | 09/480,826 |
| | Filing Date | 01/10/2000 |
| | Group Art Unit | 3773 |
| | Examiner Name | Bui, Vy Q. |
| | Title | Access Platform for Internal Mammary Dissection |

Sir:

This is in response to the Restriction Requirement dated June 20, 2008 for which a one-month period for response was given making this response due on or before July 21, 2008 (July 20, 2008 being a Sunday).

THE RESTRICTION REQUIREMENT

In the Official Action dated June 20, 2008, the Examiner required a restriction to one of the following inventions that the Examiner identified:

Group I – claims 1-3, 5-12, 14-16, 19-23 and 26, drawn to a device; and

Group II – claims 4 and 13, drawn to a method.

The Examiner required election of one of the above-listed inventions to be responsive to the Office Action.

RESPONSE

In response to the restriction requirement, Applicants elect Group 1, claims 1-3, 5-12, 14-16, 19-23 and 26, without traverse.